

## REISSUE PATENT APPLICATION TRANSMITTAL

<b>Address to:</b> Assistant Commissioner for Patents Box: Patent Application Washington, DC 20231	Attorney Docket No.	P55057RE
	First Named Inventor	YEO-CHANG YOON
	Original Patent Number	6,141,627
	Original Patent Issue Date (Month/Day/Year)	October 31, 2000
	Express Mail Label No.	

1.  APPLICATION FOR REISSUE OF: (check applicable box)  Utility Patent  Design Patent  Plant Patent

<b>APPLICATION ELEMENTS (37 CFR 1.173)</b>		<b>ACCOMPANYING APPLICATION PARTS</b>	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (PTO/SB/56) <i>(Submit an original, and a duplicate for fee processing)</i> 2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification and Claims in double column copy of patent <i>(amended, if appropriate)</i> 4. <input checked="" type="checkbox"/> Drawing(s) <i>(proposed amendments, if appropriate)</i> 5. <input checked="" type="checkbox"/> Reissue Oath/Declaration <i>(executed)</i> <i>(37 C.F.R. §1.175)(PTO/SB/51 or 52)</i> 6. <input checked="" type="checkbox"/> Original U.S. Patent currently assigned? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <i>(If Yes, check applicable box(es))</i> <input checked="" type="checkbox"/> Written Consent of all Assignees <i>(PTO/SB/53)</i> <b>-combined in Declaration</b> <input checked="" type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(PTO/SB/96)</i> <b>-combined in Declaration</b>		7. <input checked="" type="checkbox"/> Statement of status/support for all changes to the claims. See 37 CFR 1.173(c). <b>-combined in Declaration</b> 8. <input checked="" type="checkbox"/> Original U.S. patent for surrender <input type="checkbox"/> Ribboned Original Patent Grant <input checked="" type="checkbox"/> Statement of Loss (PTO/SB/55)- <b>-combined in Declaration</b> 9. <input type="checkbox"/> Foreign Priority Claim <i>(35 U.S.C. 119) (If applicable)</i> 10. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS) PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citations 11. <input type="checkbox"/> English Translation of Reissue Oath/Declaration <i>(If applicable)</i> 12. <input checked="" type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard <i>(MPEP 503)</i> <i>(Should be specifically itemized)</i> 14. <input checked="" type="checkbox"/> Other: <u>Reissue Application Fee Transmittal Form</u> <u>Check #40782 for \$2,666.00</u>	

## 15. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label <i>(Insert Customer No. Or Attach bar code label here)</i>	008-439		<input checked="" type="checkbox"/> Correspondence address below		
Name	ROBERT E. BUSHNELL and Law Firm				
Address	1522 K Street, N.W., Suite 300				
City	Washington	State	D.C.	Zip Code	20005-1202
Country	U.S.A.	Telephone	(202) 408-9040	Fax	(202) 289-7100

NAME (Print/Type)	Robert E. Bushnell	Registration No. (Attorney Agent)	27,774
Signature		Date	20 December 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent & Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

## REISSUE APPLICATION FEE TRANSMITTAL FORM

Docket Number (Optional)

P55057RE

## Claims as Filed - Part 1

Claims in Patent	For	Number filed in Reissue Application	(3) Number Extra	Small Entity		Other than a Small Entity	
				Rate	Fee	Rate	Fee
(A) 12	Total Claims (37 CFR 1.16(j))	(B) 57	**** * 37 =	×\$ ____ =		or	×\$ <u>18</u> = 666.00
(C) 3	Independent Claims (37 CFR 1.16 (j))	(D) 18	* 15 =	×\$ ____ =			×\$ <u>84</u> = 1,260.00
				Basic Fee (37 CFR 1.16(h))		\$ ____	\$ <u>740.00</u>
				Total Filing Fee		\$ ____	\$ <u>2,666.00</u>

## Claims as Filed - Part 2

	(1) Claims Remaining After Amendment		(2) Highest Number Previously Paid For	(3) Extra Claims Present	Small Entity		Other than a Small Entity	
					Rate	Fee	Rate	Fee
Total Claims (37 CFR 1.16(j))	***	MINUS	**	* =	×\$ ____ =		or	×\$ ____ =
Independent (37 CFR 1.16(j))	***	MINUS	*****	0	×\$ ____ =			×\$ ____ =
					Total Additional Fee		OR	\$ ____

\* If the entity in (D) is less than the entity in (C), Write "0" in column 3.

\*\* If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space.

\*\*\* After any cancellation of claims.

\*\*\*\* If "A" is greater than 20, use (B-A); if "A" is 20 or less, use (B-20).

\*\*\*\*\* "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C).

Please charge Deposit Account No. \_\_\_\_\_ in the amount of \_\_\_\_\_.  
A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge any additional fees under 37 CFR 1.16 or 1.17 which may be required, or credit any overpayment to Deposit Account No. 02-4943.

A check (#40782) in the amount of \$ 2,666.00 to cover the filing/additional fee is enclosed.

20 December 2001

Date

Signature of Applicant, Attorney or Agent of Record

Robert E. Bushnell

Typed or printed name

# FEE TRANSMITTAL

Patent fees are subject to annual revision.

## Complete If Known

Original Patent No.	6,141,627 (31 October 2000)
Filing Date	20 December 2001
First Named Inventor	Yeo-Chang YOON
Examiner Name	to be assigned
Group/Art Unit	to be assigned

TOTAL AMOUNT OF PAYMENT (\$ 2,666.00)

Attorney Docket No. P55057RE

## METHOD OF PAYMENT (check one)

## FEE CALCULATION (continued)

1.  The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

## 3. ADDITIONAL FEES

Deposit Account Number: 02-4943

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
105	130	205	65	Surcharge-late filing fee or oath	\$
127	50	227	25	Surcharge-late provisional filing fee or cover sheet	\$
139	130	139	130	Non-English specification	\$
147	2,520*	147	2,520*	For filing a request for reexamination	\$
142	920*	112	920*	Requesting publication of SIR prior to Examiner action	\$
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	\$
115	110	215	55	Extension for reply within first month	\$
116	400	216	200	Extension for reply within second month	\$
117	920	217	460	Extension for reply within third month	\$
118	1,440	218	720	Extension for reply within fourth month	\$
119	320	219	160	Extension for reply within fifth month	\$
120	320	220	160	Notice of Appeal	\$
121	280	221	140	Filing a brief in support of an appeal	\$
138	1,510	138	1,510	Request for oral hearing	\$
140	110	240	55	Petition to institute a public use proceeding	\$
141	1,280	241	640	Petition to revive - unavoidable	\$
142	1,280	242	640	Petition to revive - unintentional	\$
143	460	243	230	Utility issue fee (or reissue)	\$
144	620	244	310	Design issue fee	\$
122	130	122	130	Plant issue fee	\$
123	50	123	50	Petitions to the Commissioner	\$
126	180	126	180	Processing fee for provisional applications	\$
581	40	581	40	Submission of Information Disclosure Statement	\$
146	740	246	370	Recording each patent assignment per property (Times number of properties)	\$
149	740	249	370	Filing a submission after final rejection (37 C.F.R. §1.129(a))	\$
				For each additional invention to be examined (37 C.F.R. §1.129(b))	\$
				Other Fee (specify) _____	\$
				Other Fee (specify) _____	\$

SUBTOTAL (1) (\$ 740.00)

2. EXTRA CLAIM FEES		Fee Description	Fee Paid
		Extra Claims	Fee from below
Total claims	57	-20** =	37 x 18 = 666.00
Independent Claims	18	- 3** =	15 x 84 = 1,260.00
Multiple Dependent			=
** or number previously paid, if greater; For Reissues, see below			
Large Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code (\$)	
103	18	203	9
102	84	202	42
104	280	204	140
109	84	209	42
110	18	210	9
** Reissue independent claims over original patent			
** Reissue claims in excess of 20 and over original patent			
SUBTOTAL (2) (\$ 1,926.00)		** Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3) \$ .00	

## SUBMITTED BY

## Complete (if applicable)

Typed or Printed Name

Robert E. Bushnell, Esq.

Reg. Number

27,774

Signature

Date

20 December 2001

Deposit Account User ID

REB/kf

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